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**STD SCREENING GUIDELINES FOR SEXUALLY ACTIVE HIV POSITIVE PERSONS
(JAN. 2003)**

Due to the continuing rise in syphilis as well as gonorrhea and chlamydia, we recommend routine screening of HIV infected persons based on the following schedule in order to decrease the transmission of these curable STDs as well as HIV.

INITIAL VISIT AND ANNUAL VISIT

1. Testing should be performed for gonorrhea and chlamydia using urine testing for men and/or endocervical swab testing for women. Gonorrhea culture may also be used. Syphilis screening should be performed with an RPR.
 - a. Patients engaging in rectal intercourse should be cultured for GC and CT from the anal site. DFA may also be used for chlamydia.
 - b. Patients engaging in oral sex defined as activity in which they are orally exposed should be cultured for GC and CT from the pharyngeal area. DFA may also be used for chlamydia.
2. Women should be evaluated for the above, plus trichomoniasis using culture or vaginal wet mount.

FOLLOW-UP VISITS (EVERY 3 – 6 MONTHS)

HIV infected persons with symptoms of an STD should be screened upon presentation for care. Screening for syphilis, GC, and CT should be performed at 3 to 6 month intervals for persons at high risk for STDs but without STD symptoms. These persons include but are not limited to:

1. Persons with multiple or anonymous sex partners.
2. Persons with a past history of any STD.
3. Persons who have been recently incarcerated or those who have had sexual relations with someone recently incarcerated.
4. Persons reporting other behaviors associated with the transmission of HIV and other STDs. These include:
 - a. Participation in sexual activities in bathhouses, sex clubs or circuit parties.
 - b. Use of the internet to recruit sex partners.
 - c. Engaging in sexual activity for money or drugs.
 - d. Use of sexual enhancement drugs such as methamphetamines (i.e., meth, glass, crystal), ecstasy, ketamine, viagra, cocaine, crack, GHB, and nitrates/poppers.
5. Persons with sex or needle sharing partner(s) with any of the above risks.
6. Persons using injection drugs.
7. Persons living on the street/homeless.
8. Person living in areas with high STD prevalence. Sexually active gay men in the Los Angeles area are considered high risk.